

Congresswoman Stephanie Herseth

INTERNSHIP APPLICATION

<u>I. GENERAL INFORMATION</u> — (Please print or type) Social Security Number: - -Name:_____ (Last) (First) (MI) Present Address, City, State and Zip Code: Present Phone #: E-mail: Parent's Name: Parent's Phone: Parent's Address, City, State, and Zip Code: Name of High School: Date of Graduation: Name of College/University:______ Date of Graduation:_____ Major/Minor:_____ Advisor Name/Phone #:____ Please rank order of preference, one through four, 1 being first choice: _____ Washington, D.C. Office _____ Sioux Falls Office _____ Rapid City Office Aberdeen Office Dates available: _____ Full or Part-time:

List the names, addresses relationship to you.	s & phone numbers of th	iree non-relative refere	ences (i.e. employers, pi	rofessors, etc) and the	eir
1					
2					
3					

III. ADDITIONAL INFORMATION

Please send the following information along with this completed application and cover letter to:

Congresswoman Stephanie Herseth ATTN: Intern Coordinator 326 E. 8th Street, Suite 108 Sioux Falls SD 57104

- 1. Three letters of recommendation.
- 2. School transcript(s).
- 3. Brief essay, including the following information: work experience, experience in politics/government, academic honors, awards and leadership positions, office and computer skills, why you are interested in an internship with Congresswoman Herseth, and why you would be the best choice for an intern.

For more information, contact the intern coordinator at (866) 371-8747 or (605) 367-8371.